

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

DEMOCRATIC PARTY OF ILLINOIS

ADDRESS (number and street)

P.O. BOX 518

☐ Check if different than previously reported. (ACC)

SPRINGFIELD

IL

62705

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00167015

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☒ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Michael Kasper

Signature of Treasurer

Michael Kasper

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

DEMOCRATIC PARTY OF ILLINOIS

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
04 / 01 / 2015 To: M M / D D / Y Y Y Y Y Y
04 / 30 / 2015

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2015		1719554.27
(b) Cash on Hand at Beginning of Reporting Period.....	1712819.97	
(c) Total Receipts (from Line 19)	50911.74	273594.17
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	1763731.71	1993148.44
7. Total Disbursements (from Line 31)	61362.79	290779.52
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	1702368.92	1702368.92
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

DEMOCRATIC PARTY OF ILLINOIS

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y
 04 / 01 / 2015

To:

 M M / D D / Y Y Y Y Y
 04 / 30 / 2015
I. Receipts
COLUMN A
Total This Period
COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

2500.00

6000.00

(ii) Unitemized

100.00

941.53

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

2600.00

6941.53

(b) Political Party Committees

11782.97

21462.97

(c) Other Political Committees

(such as PACs).....

0.00

47492.55

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

14382.97

75897.05

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

21882.00

117437.90

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

14646.77

80259.22

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

14646.77

80259.22

19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c))..... ▶

50911.74

273594.17

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

36264.97

193334.95

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	6803.68	54142.81
(ii) Non-Federal Share.....	12095.44	96254.04
(b) Other Federal Operating Expenditures	0.00	5162.55
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	18899.12	155559.40
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	7619.58	7628.88
(ii) "Levin" Share.....	28664.12	28699.09
(b) Federal Election Activity Paid Entirely With Federal Funds	6179.97	98892.15
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	42463.67	135220.12
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	61362.79	290779.52
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	20603.23	165826.39

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	14382.97	75897.05
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	14382.97	75897.05
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	6803.68	59305.36
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	6803.68	59305.36

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 28
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Richard Black

Mailing Address 320 George Street

City

Morris

State

IL

Zip Code

60450-1171

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-employed

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 22 / 2015

Transaction ID : SA11AI.38155

Amount of Each Receipt this Period

2500.00

Contribution

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

2500.00

TOTAL This Period (last page this line number only)..... ►

2500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 28

(check only one)

☐ 11a ☒ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Mailing Address 430 SOUTH CAPITOL STREET SE

City State Zip Code
 WASHINGTON DC 20003

FEC ID number of contributing
federal political committee.

C C00460147

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6942.97

Date of Receipt

04 / **22** / **2015**

Transaction ID : SA11B.38156

Amount of Each Receipt this Period

6942.97

Contributions

Full Name (Last, First, Middle Initial)

B. DEMOCRATIC NATIONAL COMMITTEE - TRAVEL OFFSET ACCOUNT

Mailing Address 430 SOUTH CAPITOL STREET SE

City State Zip Code
 WASHINGTON DC 20003

FEC ID number of contributing
federal political committee.

C C00460147

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

11782.97

Date of Receipt

04 / **22** / **2015**

Transaction ID : SA11B.38158

Amount of Each Receipt this Period

4840.00

Contributions

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

11782.97

TOTAL This Period (last page this line number only)..... ►

11782.97

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 28
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Champaign County Democratic Central Committee

Mailing Address P.O. Box 1455

City State Zip Code
 Champaign IL 61824

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 10 / 2015

Transaction ID : SA17.38128

Amount of Each Receipt this Period

500.00

Voter File

Full Name (Last, First, Middle Initial)

B. Dupage County Democratic Central Committee

Mailing Address P.O. Box 185

City State Zip Code
 Lombard IL 60148

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 10 / 2015

Transaction ID : SA17.38132

Amount of Each Receipt this Period

500.00

Voter File

Full Name (Last, First, Middle Initial)

C. Friends of Ernie Slottag

Mailing Address 142 Lost Tree

City State Zip Code
 Springfield IL 62704

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 22 / 2015

Transaction ID : SA17.38167

Amount of Each Receipt this Period

500.00

Voter File

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 28
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Friends of Peyton Bernot

Mailing Address 610 North Eighth Street

City State Zip Code
 Benld IL 62009

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 22 / 2015

Transaction ID : SA17.38161

Amount of Each Receipt this Period

750.00

Voter File

Full Name (Last, First, Middle Initial)

B. Friends of Terry Link

Mailing Address P.O. Box 611

City State Zip Code
 Lincolnshire IL 60069

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 10 / 2015

Transaction ID : SA17.38138

Amount of Each Receipt this Period

500.00

Voter File

Full Name (Last, First, Middle Initial)

C. Internal Revenue Service

Mailing Address Department of the Treasury

City State Zip Code
 Kansas City MO 64999

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10432.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 22 / 2015

Transaction ID : SA17.38160

Amount of Each Receipt this Period

10432.00

Refund of excess POL tax (originally reported on line 30b)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

11682.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Kane County Democrats

Mailing Address 700 E. Main Street

City

St. Charles

State

IL

Zip Code

60174

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

04 / 10 / 2015

Transaction ID : SA17.38135

Amount of Each Receipt this Period

500.00

Voter File

Full Name (Last, First, Middle Initial)

B. Madison County Democrat Central Committee

Mailing Address P.O. Box 1802

City

Granite City

State

IL

Zip Code

62040

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

04 / 10 / 2015

Transaction ID : SA17.38139

Amount of Each Receipt this Period

500.00

Voter File

Full Name (Last, First, Middle Initial)

C. McHenry County Democratic Central

Mailing Address P.O. Box 1126

City

Crystal Lake

State

IL

Zip Code

60014

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

04 / 10 / 2015

Transaction ID : SA17.38141

Amount of Each Receipt this Period

500.00

Voter File

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Peoria County Democratic Central Committee

Mailing Address 2210 W. Newport Court

City State Zip Code
 Peoria IL 61614

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 10 / 2015

Transaction ID : SA17.38143

Amount of Each Receipt this Period

500.00

Voter File

Full Name (Last, First, Middle Initial)

B. Sangamon GOTV

Mailing Address P.O. Box 5405

City State Zip Code
 Springfield IL 62705

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 22 / 2015

Transaction ID : SA17.38165

Amount of Each Receipt this Period

500.00

Voter File

Full Name (Last, First, Middle Initial)

C. Schakowsky for Congress

Mailing Address P.O. Box 5130

City State Zip Code
 Evanston IL 60204

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 22 / 2015

Transaction ID : SA17.38169

Amount of Each Receipt this Period

2000.00

Voter File

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 12 OF 28
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Schneider for Congress

Mailing Address P.O. Box 1318

City

Deerfield

State

IL

Zip Code

60015

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 22 / 2015

Transaction ID : SA17.38170

Amount of Each Receipt this Period

2000.00

Voter File

Full Name (Last, First, Middle Initial)

B. St. Clair County Democratic Central Committee

Mailing Address 26 E. Washington Street

City

Belleville

State

IL

Zip Code

62220

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 10 / 2015

Transaction ID : SA17.38149

Amount of Each Receipt this Period

500.00

Voter File

Full Name (Last, First, Middle Initial)

C. Will County Democratic Central Committee

Mailing Address P.O. Box 4242

City

Joliet

State

IL

Zip Code

60434

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 10 / 2015

Transaction ID : SA17.38151

Amount of Each Receipt this Period

500.00

Voter File

SUBTOTAL of Receipts This Page (optional)..... ►

3000.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 13 OF 28
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Winnebago County Democratic CD

Mailing Address P.O. Box 23

City

Rockford

State

IL

Zip Code

61105-0023

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 10 / 2015

Transaction ID : SA17.38153

Amount of Each Receipt this Period

500.00

Voter File

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

500.00

21182.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 14 OF 28

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Illinois Department of Employment Security

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		14		2015

Mailing Address P.O. Box 19493

City	State	Zip Code
Springfield	IL	62703

Purpose of Disbursement
Payroll taxes

Candidate Name

Category/
Type**Transaction ID : SB30B.38192**

Amount of Each Disbursement this Period

12.71

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

B. Illinois Department of Employment Security

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		27		2015

Mailing Address P.O. Box 19493

City	State	Zip Code
Springfield	IL	62703

Purpose of Disbursement
Payroll taxes

Candidate Name

Category/
Type**Transaction ID : SB30B.38215**

Amount of Each Disbursement this Period

58.33

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

C. Illinois Department of Revenue

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		01		2015

Mailing Address P.O. Box 19034

City	State	Zip Code
Springfield	IL	62794-9034

Purpose of Disbursement
Voter file tax expense

Candidate Name

Category/
Type**Transaction ID : SB30B.38172**

Amount of Each Disbursement this Period

1146.00

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1217.04

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 15 OF 28

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Internal Revenue Service

Mailing Address Department of the Treasury

City	State	Zip Code
Kansas City	MO	64999

Purpose of Disbursement
Payroll withholding

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		14		2015

Transaction ID : SB30B.38191

Amount of Each Disbursement this Period

657.15

Full Name (Last, First, Middle Initial)

B. Internal Revenue Service

Mailing Address Department of the Treasury

City	State	Zip Code
Kansas City	MO	64999

Purpose of Disbursement
Payroll withholding

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		29		2015

Transaction ID : SB30B.38211

Amount of Each Disbursement this Period

657.15

Full Name (Last, First, Middle Initial)

C. Kenneth Kimber

Mailing Address 2217 Boysenberry Lane

City	State	Zip Code
Springfield	IL	62711

Purpose of Disbursement
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		14		2015

Transaction ID : SB30B.38184

Amount of Each Disbursement this Period

1550.72

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2865.02

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 16 OF 28

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

Full Name (Last, First, Middle Initial)

A. Kenneth Kimber

Mailing Address 2217 Boysenberry Lane

City
SpringfieldState
ILZip Code
62711Purpose of Disbursement
Wages

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		29		2015

Transaction ID : SB30B.38208

Amount of Each Disbursement this Period

1550.72

Full Name (Last, First, Middle Initial)

B. Kenneth Kimber

Mailing Address 2217 Boysenberry Lane

City
SpringfieldState
ILZip Code
62711Purpose of Disbursement
Insurance

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		29		2015

Transaction ID : SB30B.38216

Amount of Each Disbursement this Period

312.81

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1863.53

5945.59

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 17 OF 28

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)
 DEMOCRATIC PARTY OF ILLINOIS

NAME OF ACCOUNT
 DEMOCRATIC PARTY OF ILLINOIS

DATE OF RECEIPT

M M / D D / Y Y Y Y Y Y
 04 / 06 / 2015

TOTAL AMOUNT TRANSFERRED

14646.77

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

14646.77

Transaction ID : H3.38125

ii) Generic Voter Drive

iii) Exempt Activities.....

iv) Direct Fundraising (List Activity or Event Identifier)

a)

b)

c) Total Amount Transferred For Direct Fundraising

v) Direct Candidate Support (List Activity or Event Identifier)

a)

b)

c) Total Amount Transferred For Direct Candidate Support.....

vi) Public Communications Referring Only to Party (Made by PAC)

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

14646.77

TOTAL This Period (Generic Voter Drive)

0.00

TOTAL This Period (Exempt Activities)

0.00

TOTAL This Period (Direct Fundraising)

0.00

TOTAL This Period (Direct Candidate Support)

0.00

TOTAL This Period (Public Communications Referring Only to Party)

0.00

TOTAL This Period (Total Amount Transferred).....

14646.77

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 18 OF 28

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

A. Full Name (Last, First, Middle Initial) ADP		Transaction ID : H4.38174		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address P.O. Box 842854				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City Boston	State MA	Zip Code 02284		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Payroll fee			Category/ Type	Allocated Activity or Event Year-To-Date 126574.29	
Activity or Event Identifier: Administrative				Date <input type="text" value="04"/> / <input type="text" value="03"/> / <input type="text" value="2015"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
27.56			49.00		76.56

B. Full Name (Last, First, Middle Initial) Confidential On Site Paper Shredding		Transaction ID : H4.38176		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 422 S. White Oak Road				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City Normal	State IL	Zip Code 61761		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Paper shredding			Category/ Type	Allocated Activity or Event Year-To-Date 126732.24	
Activity or Event Identifier: Administrative				Date <input type="text" value="04"/> / <input type="text" value="13"/> / <input type="text" value="2015"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
56.86			101.09		157.95

C. Full Name (Last, First, Middle Initial) AT & T-P.O. Box 5014 Carol Stream		Transaction ID : H4.38178		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address P.O. Box 5014				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City Carol Stream	State IL	Zip Code 60197		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Telephone			Category/ Type	Allocated Activity or Event Year-To-Date 126777.24	
Activity or Event Identifier: Administrative				Date <input type="text" value="04"/> / <input type="text" value="13"/> / <input type="text" value="2015"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
16.20			28.80		45.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
100.62		178.89		279.51

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 19 OF 28

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

A. Full Name (Last, First, Middle Initial) Culligan of Decatur		Transaction ID : H4.38179		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2767 N. Main Street					
City Decatur	State IL	Zip Code 62526			
Purpose of Disbursement: Water				Allocated Activity or Event Year-To-Date 126780.76	
Activity or Event Identifier: Administrative		Category/ Type		Date <input type="text" value="04"/> / <input type="text" value="13"/> / <input type="text" value="2015"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
1.27			2.25		3.52

B. Full Name (Last, First, Middle Initial) AT & T-P.O. Box 5080		Transaction ID : H4.38180		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P.O. Box 5080					
City Carol Stream	State IL	Zip Code 60197			
Purpose of Disbursement: Telephone				Allocated Activity or Event Year-To-Date 127099.04	
Activity or Event Identifier: Administrative		Category/ Type		Date <input type="text" value="04"/> / <input type="text" value="13"/> / <input type="text" value="2015"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
114.58			203.70		318.28

C. Full Name (Last, First, Middle Initial) TTI National		Transaction ID : H4.38181		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P.O. Box 96003					
City Charlotte	State NC	Zip Code 28296-0003			
Purpose of Disbursement: Telephone				Allocated Activity or Event Year-To-Date 127118.12	
Activity or Event Identifier: Administrative		Category/ Type		Date <input type="text" value="04"/> / <input type="text" value="13"/> / <input type="text" value="2015"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
6.87			12.21		19.08

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
122.72		218.16		340.88

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 20 OF 28

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

A. Full Name (Last, First, Middle Initial) TTI National		Transaction ID : H4.38182		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address P.O. Box 96003				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City Charlotte	State NC	Zip Code 28296-0003		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Telephone				Allocated Activity or Event Year-To-Date 127165.22	
Activity or Event Identifier: Administrative		Category/ Type		Date <input type="text" value="04"/> / <input type="text" value="13"/> / <input type="text" value="2015"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
16.96			30.14		47.10

B. Full Name (Last, First, Middle Initial) Sarah Nelson		Transaction ID : H4.38185		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 655 W. Irving Park Road Apt. 5015				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City Chicago	State IL	Zip Code 60613		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Wages-spent <25% on FEA				Allocated Activity or Event Year-To-Date 128821.94	
Activity or Event Identifier: Administrative		Category/ Type		Date <input type="text" value="04"/> / <input type="text" value="14"/> / <input type="text" value="2015"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
596.42			1060.30		1656.72

C. Full Name (Last, First, Middle Initial) Emily Wurth		Transaction ID : H4.38186		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 2267 Boysenberry Lane				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City Springfield	State IL	Zip Code 62711		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Wages-spent <25% on FEA				Allocated Activity or Event Year-To-Date 130478.66	
Activity or Event Identifier: Administrative		Category/ Type		Date <input type="text" value="04"/> / <input type="text" value="14"/> / <input type="text" value="2015"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
596.42			1060.30		1656.72

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1209.80		2150.74		3360.54

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 21 OF 28

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

A. Full Name (Last, First, Middle Initial) Emily Wurth			Transaction ID : H4.38187			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2267 Boysenberry Lane								
City Springfield	State IL	Zip Code 62711				Allocated Activity or Event Year-To-Date 131091.84		
Purpose of Disbursement: Insurance-Employee spent <25% on FEA						Date <input type="text" value="04"/> / <input type="text" value="14"/> / <input type="text" value="2015"/>		
Activity or Event Identifier: Administrative			Category/ Type					
FEDERAL SHARE			+			NONFEDERAL SHARE		
220.74						=		
			392.44			TOTAL AMOUNT		
						613.18		

B. Full Name (Last, First, Middle Initial) AT & T-P.O. Box 5080			Transaction ID : H4.38188			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 5080								
City Carol Stream	State IL	Zip Code 60197				Allocated Activity or Event Year-To-Date 131649.41		
Purpose of Disbursement: Telephone						Date <input type="text" value="04"/> / <input type="text" value="14"/> / <input type="text" value="2015"/>		
Activity or Event Identifier: Administrative			Category/ Type					
FEDERAL SHARE			+			NONFEDERAL SHARE		
200.73						=		
			356.84			TOTAL AMOUNT		
						557.57		

C. Full Name (Last, First, Middle Initial) Perkins Coie			Transaction ID : H4.38189			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 607 Fourteenth Street N.W.								
City Washington	State DC	Zip Code 20005				Allocated Activity or Event Year-To-Date 135664.52		
Purpose of Disbursement: Legal						Date <input type="text" value="04"/> / <input type="text" value="14"/> / <input type="text" value="2015"/>		
Activity or Event Identifier: Administrative			Category/ Type					
FEDERAL SHARE			+			NONFEDERAL SHARE		
1445.44						=		
			2569.67			TOTAL AMOUNT		
						4015.11		

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1866.91		3318.95		5185.86

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 22 OF 28

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

A. Full Name (Last, First, Middle Initial) Internal Revenue Service		Transaction ID : H4.38193	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address Department of the Treasury				
City Kansas City	State MO	Zip Code 64999		
Purpose of Disbursement: Payroll withholding for employee-spent <25% on FEA			Allocated Activity or Event Year-To-Date 137113.16	
Activity or Event Identifier: Administrative		Category/ Type	Date <input type="text" value="04"/> / <input type="text" value="14"/> / <input type="text" value="2015"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
521.51			927.13	1448.64

B. Full Name (Last, First, Middle Initial) Illinois Department of Revenue		Transaction ID : H4.38194	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P.O Box 19447				
City Springfield	State IL	Zip Code 62794		
Purpose of Disbursement: Payroll withholding for employee-spent <25% on FEA			Allocated Activity or Event Year-To-Date 137285.04	
Activity or Event Identifier: Administrative		Category/ Type	Date <input type="text" value="04"/> / <input type="text" value="14"/> / <input type="text" value="2015"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
61.88			110.00	171.88

C. Full Name (Last, First, Middle Initial) Illinois Department of Employment Security		Transaction ID : H4.38195	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P.O. Box 19493				
City Springfield	State IL	Zip Code 62703		
Purpose of Disbursement: Payroll taxes for employee-spent <25% on FEA			Allocated Activity or Event Year-To-Date 137562.34	
Activity or Event Identifier: Administrative		Category/ Type	Date <input type="text" value="04"/> / <input type="text" value="14"/> / <input type="text" value="2015"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
99.83			177.47	277.30

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
683.22		1214.60		1897.82

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

A. Full Name (Last, First, Middle Initial) Citrix Online, LLC		Transaction ID : H4.38196		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address File 50264				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City Los Angeles	State CA	Zip Code 90074		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Membership		Category/ Type		Allocated Activity or Event Year-To-Date 137829.34	
Activity or Event Identifier: Administrative				Date 04 / 21 / 2015	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
96.12			170.88		267.00

B. Full Name (Last, First, Middle Initial) UPS		Transaction ID : H4.38197		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address Lockbox 577				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City Carol Stream	State IL	Zip Code 60132-0577		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Shipping		Category/ Type		Allocated Activity or Event Year-To-Date 137860.60	
Activity or Event Identifier: Administrative				Date 04 / 21 / 2015	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
11.25			20.01		31.26

C. Full Name (Last, First, Middle Initial) Quill Corporation		Transaction ID : H4.38198		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address P.O. Box 37600				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City Philadelphia	State PA	Zip Code 19101		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Office supplies		Category/ Type		Allocated Activity or Event Year-To-Date 138097.19	
Activity or Event Identifier: Administrative				Date 04 / 21 / 2015	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
85.17			151.42		236.59

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
192.54		342.31		534.85

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

A. Full Name (Last, First, Middle Initial) ADP		Transaction ID : H4.38199		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P.O. Box 842854					
City Boston	State MA	Zip Code 02284			
Purpose of Disbursement: Payroll fee				Allocated Activity or Event Year-To-Date 138177.20	
Activity or Event Identifier: Administrative		Category/ Type		Date 04 / 24 / 2015	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
28.80			51.21		80.01

B. Full Name (Last, First, Middle Initial) Comcast Cable		Transaction ID : H4.38200		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P.O. Box 3001					
City Southeastern	State PA	Zip Code 19398			
Purpose of Disbursement: TV and internet				Allocated Activity or Event Year-To-Date 138350.65	
Activity or Event Identifier: Administrative		Category/ Type		Date 04 / 27 / 2015	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
62.44			111.01		173.45

C. Full Name (Last, First, Middle Initial) Burnham Center		Transaction ID : H4.38201		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 111 West Washington					
City Chicago	State IL	Zip Code 60602			
Purpose of Disbursement: Rent				Allocated Activity or Event Year-To-Date 140197.31	
Activity or Event Identifier: Administrative		Category/ Type		Date 04 / 27 / 2015	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
664.80			1181.86		1846.66

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
756.04		1344.08		2100.12

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

A. Full Name (Last, First, Middle Initial) Illinois Department of Agriculture			Transaction ID : H4.38204			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 19427								
City Springfield	State IL	Zip Code 62794				Allocated Activity or Event Year-To-Date 143332.31		
Purpose of Disbursement: State fair space rental						Date <input type="text" value="04"/> / <input type="text" value="27"/> / <input type="text" value="2015"/>		
Activity or Event Identifier: Administrative			Category/ Type					
FEDERAL SHARE			+			NONFEDERAL SHARE		
1128.60						=		
			2006.40			TOTAL AMOUNT		
						3135.00		

B. Full Name (Last, First, Middle Initial) CWLP			Transaction ID : H4.38207			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 300 South Seventh Street								
City Springfield	State IL	Zip Code 62757				Allocated Activity or Event Year-To-Date 143347.79		
Purpose of Disbursement: Utilities						Date <input type="text" value="04"/> / <input type="text" value="28"/> / <input type="text" value="2015"/>		
Activity or Event Identifier: Administrative			Category/ Type					
FEDERAL SHARE			+			NONFEDERAL SHARE		
5.57						=		
			9.91			TOTAL AMOUNT		
						15.48		

C. Full Name (Last, First, Middle Initial) Sarah Nelson			Transaction ID : H4.38209			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 655 W. Irving Park Road Apt. 5015								
City Chicago	State IL	Zip Code 60613				Allocated Activity or Event Year-To-Date 144625.47		
Purpose of Disbursement: Wages-spent <25% on FEA						Date <input type="text" value="04"/> / <input type="text" value="29"/> / <input type="text" value="2015"/>		
Activity or Event Identifier: Administrative			Category/ Type					
FEDERAL SHARE			+			NONFEDERAL SHARE		
459.96						=		
			817.72			TOTAL AMOUNT		
						1277.68		

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1594.13		2834.03		4428.16

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

A. Full Name (Last, First, Middle Initial) Emily Wurth			Transaction ID : H4.38210			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2267 Boysenberry Lane								
City Springfield	State IL	Zip Code 62711				Allocated Activity or Event Year-To-Date 144757.66		
Purpose of Disbursement: Wages-spent <25% on FEA						Date <input type="text" value="04"/> / <input type="text" value="29"/> / <input type="text" value="2015"/>		
Activity or Event Identifier: Administrative			Category/ Type					
FEDERAL SHARE			+			NONFEDERAL SHARE		
47.59						84.60		
						= TOTAL AMOUNT		
						132.19		

B. Full Name (Last, First, Middle Initial) Internal Revenue Service			Transaction ID : H4.38213			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address Department of the Treasury								
City Kansas City	State MO	Zip Code 64999				Allocated Activity or Event Year-To-Date 145271.68		
Purpose of Disbursement: Payroll withholding for employee-spent <25% on FEA						Date <input type="text" value="04"/> / <input type="text" value="29"/> / <input type="text" value="2015"/>		
Activity or Event Identifier: Administrative			Category/ Type					
FEDERAL SHARE			+			NONFEDERAL SHARE		
185.05						328.97		
						= TOTAL AMOUNT		
						514.02		

C. Full Name (Last, First, Middle Initial) Illinois Department of Revenue			Transaction ID : H4.38214			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O Box 19447								
City Springfield	State IL	Zip Code 62794				Allocated Activity or Event Year-To-Date 145341.12		
Purpose of Disbursement: Payroll withholding for employee-spent <25% on FEA						Date <input type="text" value="04"/> / <input type="text" value="29"/> / <input type="text" value="2015"/>		
Activity or Event Identifier: Administrative			Category/ Type					
FEDERAL SHARE			+			NONFEDERAL SHARE		
25.00						44.44		
						= TOTAL AMOUNT		
						69.44		

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
257.64		458.01		715.65

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

A. Full Name (Last, First, Middle Initial) UPS		Transaction ID : H4.38217		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address Lockbox 577					
City Carol Stream	State IL	Zip Code 60132-0577			
Purpose of Disbursement: Shipping				Allocated Activity or Event Year-To-Date 145396.85	
Activity or Event Identifier: Administrative		Category/ Type		Date MM / DD / YYYY 04 / 30 / 2015	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
20.06			35.67		55.73

B. Full Name (Last, First, Middle Initial)				Allocated Activity or Event: <input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address					
City	State	Zip Code			
Purpose of Disbursement:				Allocated Activity or Event Year-To-Date	
Activity or Event Identifier:		Category/ Type		Date MM / DD / YYYY	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT

C. Full Name (Last, First, Middle Initial)				Allocated Activity or Event: <input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address					
City	State	Zip Code			
Purpose of Disbursement:				Allocated Activity or Event Year-To-Date	
Activity or Event Identifier:		Category/ Type		Date MM / DD / YYYY	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
20.06		35.67		55.73

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
6803.68	12095.44	18899.12

SCHEDULE H6 (FEC Form 3X)
DISBURSEMENTS OF FEDERAL AND LEVIN FUNDS
FOR ALLOCATED FEDERAL ELECTION ACTIVITY
 (To be used by State, District and Local Party Committees Only)

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FOR LINE 30a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

A. Full Name (Last, First, Middle Initial) / Full Organization Name

The Sexton Group

Type of Allocated Activity or Event:

☐ Voter Registration ☒ GOTV
☐ Voter ID ☐ Generic Campaign

Transaction ID : H6.38183

Mailing Address 321 N. Clark

Allocated Activity or Event Year-To-Date

36283.70

City	State	Zip Code
Chicago	IL	60654

Category/
TypePurpose of Disbursement
GOTV calls Coordinated Campaign

Date 04 / 13 / 2015

FEDERAL SHARE

+

LEVIN SHARE

=

TOTAL AMOUNT

7619.58

28664.12

36283.70

B. Full Name (Last, First, Middle Initial) / Full Organization Name

Type of Allocated Activity or Event:

☐ Voter Registration ☐ GOTV
☐ Voter ID ☐ Generic Campaign

Mailing Address

Allocated Activity or Event Year-To-Date

City	State	Zip Code
------	-------	----------

Category/
Type

Purpose of Disbursement

Date / /

FEDERAL SHARE

+

LEVIN SHARE

=

TOTAL AMOUNT

C. Full Name (Last, First, Middle Initial) / Full Organization Name

Type of Allocated Activity or Event:

☐ Voter Registration ☐ GOTV
☐ Voter ID ☐ Generic Campaign

Mailing Address

Allocated Activity or Event Year-To-Date

City	State	Zip Code
------	-------	----------

Category/
Type

Purpose of Disbursement

Date / /

FEDERAL SHARE

+

LEVIN SHARE

=

TOTAL AMOUNT

SUBTOTAL of Shared Federal and Levin Activity This Page

FEDERAL SHARE

+

LEVIN SHARE

=

TOTAL AMOUNT

7619.58

28664.12

36283.70

TOTAL This Period (last page for each line only)(Federal share to 30(a)(i) and Levin share to 30(a)(ii))

FEDERAL SHARE

7619.58

TOTAL AMOUNT

36283.70

LEVIN SHARE

28664.12

TOTAL This Period for the Levin Share